



STATE OF IDAHO DEPARTMENT OF ENVIRONMENTAL QUALITY

DRINKING WATER PLANNING GRANT

CERTIFICATION OF FINANCIAL & MANAGEMENT CAPABILITY

Grantee			
Address			
City	State	Zip Code	Telephone
Grant No.			
<p>I hereby certify that we have analyzed the financial, institutional and managerial impacts of the local share of this project on this community and the residents of the service area. We have also reviewed and understand the need for supervision and management of the planning project.</p>			
<p>As a result of this analysis, I have found that we have the legal, institutional, managerial, and financial capability to complete the planning work in accordance with a plan of study.</p>			
<i>Signature</i> of elected official or officer authorized to commit funding			Date
Print Name			
Title			